PATENT APPLICATION FEE DETERMINATION	<b>RECORD</b>
Effective October 1, 2003	•

Application or Docket Number

71161

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE  OF			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			36			-	-	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
то	TAL CHARGEA	BLE CLAIMS	36 minus 20=		• /	16	4	X\$ 9=	144,00	OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 = *		*	<del></del>		X43=	43.00	OR	X86=	
MU	LTIPLE DEPEN	IDENT CLAIM PR	RESENT					+145=	17		+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR OR	TOTAL	
CLAIMS AS AMENDED - PART II								IVIAL		Un	OTHER	THAN
1	1(ds5	(Column 1)		(Colun	nn 2)	(Column 3)		SMALL	ENTITY	OR		
NT A		CLAIMS REMAINING AFTER AMENDMENT		NUMI	MBER PRESENT			RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT A	Total	.38	Minus	2700				<b>3</b> 92		OR	Sign Sign Sign Sign Sign Sign Sign Sign	100
AME	Independent	* 4	Minus +++ 3 = ULTIPLE DEPENDENT CLAIM				X43º		OR	X86=	300	
	FIRST PRESE	NIAHUN UP MI	JLIIPLE DET	'ENDER!	CLAIN		<sup> </sup>	+145=		OR	+290=	
				•			L	TOTAL ADDIT, FEE		ا	TOTAL: ADDIT, FEE	
(Column 1) (Column 2) (Column 3)							_ ′	ADVII. FEL I			AUUN, TEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA-		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENI	CLAIM		1	+145=		OR	+290=	
							L	TOTAL		OB.	TOTAL ADDIT, FEE	
ADDIT. FEE ADDIT. FEEL (Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	*	Minus	and .		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***				X43=		OR	X86=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
		mn 1 is less than th					. L	TOTAL		OR	TOTAL	
***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***To the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

## ATTORNEY DOCKET NO: 71161

HECEIVED CENTRAL FAX CENTER MAY 2 6 2005

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant

: RIMEDIOTTI et al.

Serial No

: 10/680,502

Confirm. No: 5507

Filed

: October 7, 2003

For

: VACUUM VAPORIZATION...

Art Unit

: 1762

Examiner

: Bueker, Richard R.

Dated

: May 25, 2005

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

## <u>AMENDMENT</u>

In response to the Office Action dated January 26, 2005, please amend the aboveidentified application as follows:

06/22/2005 TLOVELAC 00000001 130410 10680502

01 FC:1201

200.00 DA

06/22/2005 TLOVELAC 00000001 130410 10680502 - Sale Ref: 00000001 DAW: 130410 10680502 01 FC:1201 200.00 DA

95/27/2055 BROWNER 9888836 18688592

01 FC:1262

109.69 OP

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